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DECLARATION — Utility or Design Patent Application

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I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

NAME OF SOLE OR FIRST INVENTOR:



A petition has been filed for this unsigned inventor

Given Name
(first and middle [if any])Jean PaulFamily Name
or SurnameCrazeInventor's
SignatureJean Paul Craze

Date

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Additional inventors or a legal representative are being named on the _____ supplemental sheet(s) PTO/SB/02A or 02LR attached hereto.



MAR 26 2004

PTO/SB/81 (09-03)

Approved for use through 11/30/2005. OMB 0651-0035

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**POWER OF ATTORNEY
and
CORRESPONDENCE ADDRESS
INDICATION FORM**

Application Number	10/719,438
Filing Date	Nov. 21, 2003
First Named Inventor	Paul Croze
Title	Wheel Lift...
Art Unit	3723
Examiner Name	Not Yet Known
Attorney Docket Number	i0022

I hereby appoint:

Practitioners associated with the Customer Number:

35420

AND/OR

Practitioner(s) named below:

Name	Registration Number
Michael P. Mazza	34,092

as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith.

Please recognize or change the correspondence address for the above-identified application to:

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OR

<input checked="" type="checkbox"/>	Firm or Individual Name	Michael P. Mazza, LLC		
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I am the:

Applicant/Inventor.

Assignee of record of the entire interest. See 37 CFR 3.71.
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)

SIGNATURE of Applicant or Assignee of Record

Name *Paul Croze*
 Signature *Paul Croze*
 Date *November 16, 2003* Telephone *757-494-7112*

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

*Total of _____ forms are submitted.

This collection of information is required by 37 CFR 1.31 and 1.33. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 3 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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